Introduced by Senator Margett

February 19, 2004

An act to amend Section 1250.8 of the Health and Safety Code, relating to health facilities.

LEGISLATIVE COUNSEL'S DIGEST

SB 1540, as introduced, Margett. Health facilities.

Existing law provides for the licensure and regulation by the State Department of Health Services of health facilities, including general acute care hospitals. Existing law authorizes the department to issue a consolidated license to any general acute care hospital that includes more than one physical plant maintained and operated on separate premises or has multiple licenses for a single health facility on the same premises if the hospital meets applicable licensing requirements and established criteria.

This bill would make technical, nonsubstantive changes to this provision.

Vote: majority. Appropriation: no. Fiscal committee: no. State-mandated local program: no.

The people of the State of California do enact as follows:

- 1 SECTION 1. Section 1250.8 of the Health and Safety Code 2 is amended to read:
- 3 1250.8. (a) Notwithstanding subdivision (a) of Section
- 4 437.10 127170, the state department, upon application of a
- 5 general acute care hospital-which that meets all the criteria of
- 6 subdivision (b), and other applicable requirements of licensure,
- 7 shall issue a single consolidated license to a general acute care

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hospital—which that includes more than one physical plant maintained and operated on separate premises or which has multiple licenses for a single health facility on the same premises. A single consolidated license shall not be issued where the separate freestanding physical plant is a skilled nursing facility or an intermediate care facility, whether or not the location of the skilled nursing facility or intermediate care facility is contiguous to the general acute care hospital unless the hospital is exempt from the requirements of subdivision (b) of Section 1254, or the facility is part of the physical structure licensed to provide acute care.

- (b) The issuance of a single consolidated license shall be based on the following criteria:
- (1) There is a single governing body for all of the facilities maintained and operated by the licensee.
- (2) There is a single administration for all of the facilities maintained and operated by the licensee.
- (3) There is a single medical staff for all of the facilities maintained and operated by the licensee, with a single set of bylaws, rules, and regulations, which prescribe a single committee structure.
- (4) Except as provided otherwise in this paragraph, the physical plants, maintained and operated by the licensee which, that are to be covered by the single consolidated license are located not more than 15 miles apart. If an applicant provides evidence satisfactory to the department that it can comply with all requirements of licensure and provide quality care and adequate administrative and professional supervision, the director may issue a single consolidated license to a general acute care hospital that operates two or more physical plants located more than 15 miles apart under any of the following circumstances:
- (A) One or more of the physical plants is located in a rural area, as defined by regulations of the director.
- (B) One or more of the physical plants provides only outpatient services, as defined by the department.
- (C) If Section 14105.986 of the Welfare and Institutions Code is implemented and the applicant meets all of the following criteria:
 - (i) The applicant is a nonprofit corporation.
- (ii) The applicant is a children's hospital listed in Section 10727 of the Welfare and Institutions Code.

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(iii) The applicant is affiliated with a major university medical school, and located adjacent thereto.

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- (iv) The applicant operates a regional tertiary care facility.
- (v) One of the physical plants is located in a county that has a consolidated and county government structure.
- (vi) One of the physical plants is located in a county having a population between 1 million and 2 million.
- (vii) The applicant is located in a city with a population between 50,000 and 100,000.
- (c) In issuing the single consolidated license, the state department shall specify the location of each supplemental service and the location of the number and category of beds provided by the licensee. The single consolidated license shall be renewed annually.
- (d) To the extent required by Part 1.5 Chapter 1 (commencing with Section 437) 127125) of Part 2 of Division 107, a general acute care hospital-which that has been issued a single consolidated license:
- (1) Shall not transfer from one facility to another a special service described in Section 1255 without first obtaining a certificate of need.
- (2) Shall not transfer, in whole or in part, from one facility to another, a supplemental service, as defined in regulations of the director pursuant to this chapter, without first obtaining a certificate of need, unless the licensee, 30 days prior to the relocation, notifies the Office of Statewide Health Planning and Development, the applicable health systems agency, and the state department of the licensee's intent to relocate the supplemental service, and includes with this notice a cost estimate, certified by a person qualified by experience or training to render the estimates, which estimates that the cost of the transfer will not exceed the capital expenditure threshold established by the Office of Statewide Health Planning and Development pursuant to Section 437.10 127170.
- (3) Shall not transfer beds from one facility to another facility, 36 without first obtaining a certificate of need unless, 30 days prior to the relocation, the licensee notifies the Office of Statewide Health Planning and Development, the applicable health systems agency, and the state department of the licensee's intent to relocate

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1 health facility beds, and includes with this notice both of the 2 following:

- (A) A cost estimate, certified by a person qualified by experience or training to render the estimates, which estimates that the cost of the relocation will not exceed the capital expenditure threshold established by the Office of Statewide Health Planning and Development pursuant to Section 437.10 127170.
- (B) The identification of the number, classification, and location of the health facility beds in the transferor facility and the proposed number, classification, and location of the health facility beds in the transferee facility.

Except as otherwise permitted in Part 1.5 Chapter 1 (commencing with Section-437) 127125) of Part 2 of Division-1 107, or as authorized in an approved certificate of need pursuant to that part, health facility beds transferred pursuant to this section shall be used in the transferee facility in the same bed classification as defined in Section 1250.1, as the beds were classified in the transferor facility.

Health facility beds transferred pursuant to this section shall not be transferred back to the transferor facility for two years from the date of the transfer, regardless of cost, without first obtaining a certificate of need pursuant to Part 1.5 Chapter 1 (commencing with Section 437) 127125) of Part 2 of Division 107.

- (e) All transfers pursuant to subdivision (d) shall satisfy all applicable requirements of licensure and shall be subject to the written approval, if required, of the state department. The state department may adopt *any* regulations which that are necessary to implement the provisions of this section. These regulations may include a requirement that each facility of a health facility subject to a single consolidated license have an onsite full-time or part-time administrator.
- (f) As used in this section, "facility" means any physical plant operated or maintained by a health facility subject to a single, consolidated license issued pursuant to this section.
- (g) For purposes of selective provider contracts negotiated under the Medi-Cal program, the treatment of a health facility with a single consolidated license issued pursuant to this section shall be subject to negotiation between the health facility and the California Medical Assistance Commission. A general acute care hospital which that is issued a single consolidated license pursuant

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to this section may, at its option, receive from the state department a single Medi-Cal program provider number or separate Medi-Cal program provider numbers for one or more of the facilities subject to the single consolidated license. Irrespective of Without regard to whether the general acute care hospital is issued one or more Medi-Cal provider numbers, the state department may require the hospital to file separate cost reports for each facility pursuant to Section 14170 of the Welfare and Institutions Code.

- (h) For purposes of the Annual Report of Hospitals required by regulations adopted by the state department pursuant to this part, the state department and the Office of Statewide Health Planning and Development may require reporting of bed and service utilization data separately by each facility of a general acute care hospital issued a single consolidated license pursuant to this section.
- (i) The amendments made to this section during the 1985–86 Regular Session of the California Legislature pertaining to the issuance of a single consolidated license to a general acute care hospital in the case where the separate physical plant is a skilled nursing facility or intermediate care facility shall not apply to the following facilities:
- (1) Any facility—which that obtained a certificate of need after August 1, 1984, and prior to February 14, 1985, as described in this subdivision. The certificate of need shall be for the construction of a skilled nursing facility or intermediate care facility—which that is the same facility for which the hospital applies for a single consolidated license, pursuant to subdivision (a).
- (2) Any facility for which a single consolidated license has been issued pursuant to subdivision (a), as described in this subdivision, prior to the effective date of the amendments made to this section during the 1985–86 Regular Session of the California Legislature.

Any facility—which that has been issued a single consolidated license pursuant to subdivision (a), as described in this subdivision, shall be granted renewal licenses based upon the same criteria used for the initial consolidated license.

(j) If the state department issues a single consolidated license pursuant to this section, the state department may take any action authorized by this chapter, including, but not limited to, any action specified in Article 5 (commencing with Section 1294), with

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respect to any facility, or any service provided in any facility, which that is included in the consolidated license.

- (k) The eligibility for participation in the Medi-Cal program (Chapter 7 (commencing with Section 14000), Part 3, Division 9, Welfare and Institutions Code) of any facility that is included in a consolidated license issued pursuant to this section, provides outpatient services, and is located more than 15 miles from the health facility issued the consolidated license shall be subject to a determination of eligibility by the state department. This subdivision shall not apply to any facility that is located in a rural area and is included in a consolidated license issued pursuant to subparagraphs (A), (B), and (C) of paragraph (4) of subdivision (b). Regardless of whether a facility has received or not received a determination of eligibility pursuant to this subdivision, this subdivision shall not affect the ability of a licensed professional, providing services covered by the Medi-Cal program to a person eligible for Medi-Cal in a facility subject to a determination of eligibility pursuant to this subdivision, to bill the Medi-Cal program for those services provided in accordance with applicable regulations.
- (*l*) Notwithstanding any other provision of law, the director may issue a single consolidated license for a general acute care hospital to Children's Hospital Oakland and San Ramon Regional Medical Center.